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CONFIRMATION NO. 3074

Bib Data Sheet

SERIAL NUMBER 10/073,091	FILING DATE 02/12/2002  RULE	CLASS 356	GROUP ART UNIT 2877	ATTORNEY DOCKET NO. D/A0944 (1508/3330)
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## APPLICANTS

Frederick A. Donahue, Walworth, NY;

Eric A. Merz, Palmyra, NY;

\*\* CONTINUING DATA \*\*\*\*\*

NAME *None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/08/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	NY	9	30	5

## ADDRESS

Gunnar G. Leinberg, Esq.  
 Nixon Peabody LLP  
 Clinton Square  
 P.O. Box 31051  
 Rochester, NY  
 14603-1051

## TITLE

System and method for identifying objects

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of
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